**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☒ The attached application, or
☐ Application No. _____ filed on _____
☐ as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: John CARBERRY

Signature: 

Citizen of: U.S.A.

Inventor two: Michael L. SMITH

Signature: 

Citizen of: U.S.A.

Inventor three: Richard RACINSKAS

Signature: 

Citizen of: U.S.A.

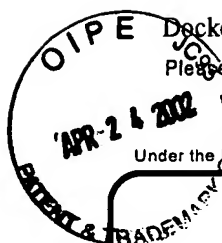
Inventor four: _____

Signature: _____

Citizen of: _____

☐ Additional inventors are being named on _____ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Docket Number: 26308.01

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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/083,095
Filing Date	2/26/02
First Named Inventor	CARBERRY, et al.
Title	Network Healing Smart Fiber Optic Switch
Group Art Unit	
Examiner Name	
Attorney Docket Number	26308.01

I hereby appoint:

☒ Practitioners at Customer Number

22465

OR

☐ Practitioner(s) named below:

Name	Registration Number

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB196).

SIGNATURE of Applicant or Assignee of Record

Name	John CARBERRY
Signature	
Date	11-04-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

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POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	10/083,095
Filing Date	2/27/02
First Named Inventor	CARBERRY, et al.
Title	Network Healing Smart Fiber Optic Switch
Group Art Unit	
Examiner Name	
Attorney Docket Number	26308.01

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Michael L. SMITH
Signature	<i>Michael L. Smith</i>
Date	Apr. 15, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

Docket Number: 26308.01

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/649,433 10/083,095
Filing Date	2/26/02
First Named Inventor	CARBERRY, et al.
Title	Network Healing Smart Fiber Optic Switch
Group Art Unit	2872
Examiner Name	Alessandro V. Amari
Attorney Docket Number	26308.01

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Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB196).

SIGNATURE of Applicant or Assignee of Record

Name	Richard RACINSKAS
Signature	<i>Richard P. Racinskas</i>
Date	4/9/2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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